FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For Ar	Authorized Comn	nittee		Office	e Use Only	
1. NAME OF COMMITTEE (in full) USE FEC MA OR TYPE OF		ample:If typing, type ver the lines				
Bill Shuster for Congress				1 1 1 1		
						Ш
ADDRESS (number and street) PO Box 2	7					
Check if different						Ш
than previously reported. (ACC)	burg		L PA		16648	Ш
2. FEC IDENTIFICATION NUMBER \(\psi\)	CITY 🛦		STAT	Ē Ā	ZIP CODE ▲ STATE ▼ DIST	[BIC]
C00364935	3. IS THIS REPORT	X NEW (N)	or 🛘	AMENDED (A)	[PA] [9	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) 12-Day PRI	E-Election Report fo	or the:			
April 15 Quarterly Report (Q1)		Primary (12P)		General (12G)	Runoff (1	2R)
		Convention (12C	S) [] S	Special (12S)		
July 15 Quarterly Report (Q2)					in the	-
October 15 Quarterly Report (Q3)	Election on				State of	
X January 31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Report	for the:			
		General (30G)	F	Runoff (30R)	Special (30S)
Termination Report (TER)	Election on				in the State of	
5. Covering Period 1 1 2 8	2006	through	12	3 1	2006	
I certify that I have examined this Report and to t		e and belief it is true	e, correct and co	omplete.		
Type or Print Name of Treasurer Fred	erick A Ciocca					
Signature of Treasurer Electronically Filed by	Frederick A Cioco	ca	Date	0 1	31 200	7
NOTE : Submission of false, erroneous, or incor	nplete information may	subject the person s	signing this Rep	ort to the penal	ties of 2 U.S.C 437g.	
Office Use Only					FEC FORM 3 (Revised 02/2003)	

Image# 27950044703

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Bill Shuster for Congress м N 12 ° D 11 28 2006 2006 Report Covering the Period: From: To: 3 1 **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 10015.00 12015.00 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds .00 .00 (from Line 20(d))..... (c) Net Contributions (other than loans) 10015.00 12015.00 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 64486.52 18480.66 (from Line 17)..... (b) Total Offsets to Operating 148.66 1236.70 Expenditures (from Line 14)..... (c) Net Operating Expenditures 18332.00 63249.82 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 36883.59 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 50.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 24480.87 Schedule C and/or Schedule D)..... For further information contact: Federal Election Commission 999 E Street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name Bill Shuster for Congress D ° D Ï 1 Ï Report Covering the Period: 28 2006 12 2006 3 1 From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 4525.00 4525.00 (i) Itemized (use Schedule A)..... 2240.00 2240.00 (ii) Unitemized..... (iii) TOTAL of contributions 6765.00 6765.00 from individuals..... .00 .00 (b) Political Party Committees..... (c) Other Political Committees 3250.00 5250.00 (such as PACS)..... .00 .00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 10015.00 12015.00 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER .00 .00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the .00 .00 Candidate..... .00 .00 (b) All Other Loans..... (c) TOTAL LOANS .00 .00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 148.66 1236.70 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS .00 .00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 13251.70 10163.66

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date 18480.66 64486.52 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER .00 .00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed .00 .00 by the Candidate..... .00 .00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS .00 .00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other .00 .00 Than Political Committees..... .00 .00 (b) Political Party Committees..... (c) Other Political Committees .00 .00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS .00 .00 (add Lines 20(a), (b), and (c))..... 120.00 3765.00 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 18600.66 68251.52 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 45320.59 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 10163.66 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... 55484.25 25. SUBTOTAL (add Line 23 and Line 24)..... 18600.66 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 36883.59 (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 27 (check only one) X 11a 11b 11c 11d 11d 15
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and ado	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Full Name (Last, First, Middle Initial) Art G Bruaw, Jr. Mailing Address PO Box 277 City Saint Thomas	State PA	Zip Code 17252	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer E. C. Barnes Inc Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Sales Election C	ycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Bruno Degol, Jr. Mailing Address RD 5 Box 25-A City	State	Zip Code	Date of Receipt 1 2 2 6 2 0 0 6 Transaction ID: SA11Ai-CN5332
Tyrone FEC ID number of contributing federal political committee. Name of Employer DeGol Organization	C Occupation		Amount of Each Receipt this Period 250.00
Receipt For: 2008 X Primary General Other (specify) ▼	Executive Election C	ycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) David DeGol Mailing Address 120 Himes Lane	•		Date of Receipt
City Duncansville FEC ID number of contributing federal political committee.	State PA	Zip Code 16635	Transaction ID: SA11Ai-CN5333 Amount of Each Receipt this Period 250.00
Name of Employer DeGol Organization Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Executive Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line numb	per only)		

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 27 (check only one) X
An or	ly information copied from such Reports and Sifor commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
۸.	Full Name (Last, First, Middle Initial) Dennis Degol Mailing Address 3229 Pleasant Valley E City	Blvd State	Zip Code	Date of Receipt 1 2 2 6 2 0 0 6 Transaction ID: SA11Ai-CN5334
	Altoona	PA	16602	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer DeGol Organization Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Executive Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Donald Degol Mailing Address 100 Sylvan Woods			Date of Receipt
	City	State	Zip Code	1 2 2 6 2 0 0 6 Transaction ID: SA11Ai-CN5335
	Hollidaysburg	PA	16648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer DeGol Organization Receipt For: 2008 X Primary General	Occupation Executive Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Other (specify) ▼		250.00	
).	Full Name (Last, First, Middle Initial) Donald Devorris			Date of Receipt
	Mailing Address 304 E Ward Avenue			12 20 7 2006
	City	State	Zip Code	Transaction ID: SA11Ai-CN5324
	Altoona FEC ID number of contributing federal political committee.	C	16602	Amount of Each Receipt this Period 1000.00
	Name of Employer Blair Electric Services	Occupation Presiden	t	Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			1500.00
T	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/27
TEMIZED RECEIPTS	or each category of the	(check only one)
	Detailed Summary Page	X 11a
Any information copied from such Reports and St.	atements may not be sold or used by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Bill Shuster for Congress		
Full Name (Last, First, Middle Initial)		
A. Harold C Gabler, Jr. Mailing Address 691 Montgomery Avenu	10	Date of Receipt
Maining Address 691 Montgomery Avenu	de	12 26 2006
City	State Zip Code	Transaction ID: SA11Ai-CN5326
Chambersburg	PA 17201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer H C Gabler Inc	Occupation	
·	COB	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 X Primary General	Election Cycle-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) 3. H Dean Gates		Date of Receipt
Mailing Address 717 Harding Street		M M / D D / Y Y Y Y
City	State Zip Code	12 20 2006
Roaring Spring	PA 16673	Transaction ID: SA11Ai-CN5313 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	225.00
Name of Employer none	Occupation	
Receipt For: 2008	Retired Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	Election Cycle-to-Date ▼	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) C. William L Hughes		Date of Receipt
Mailing Address 180 Shadyside Ln		12 20 20 6
City	State Zip Code	Transaction ID: SA11Ai-CN5311
Shelocta	PA 15774	Amount of Each Receipt this Period
FEC ID number of contributing	C	250.00
federal political committee.		255.55
Name of Employer 422 Home Sales	Occupation	The state of the s
·	Owner Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 X Primary General		
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)	·····	975.00
TOTAL This Period (last page this line number of	only)	
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S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 27
	EMIZED RECEIPTS		or each category of the	(check only one)
•	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
			• •	12 13a 13b 14 15
A	ny information copied from such Reports and State for commercial purposes, other than using the nan	ments may	not be sold or used by any person	on for the purpose of soliciting contributions
01		ile and add	diess of any political committee to	Solicit Contributions from Such Committee.
$ \setminus$	NAME OF COMMITTEE (In Full)			
17	Bill Shuster for Congress			
<u>Z</u>	E. H. N. Lander (Lander Effect Martiallia Landral)			
Α.	Full Name (Last, First, Middle Initial) Margaret K. Kilcoin			Date of Receipt
۸.	Mailing Address 800 Preston Street-Apt #2			M M / D D / Y Y Y Y
	Walling Address 800 Freston Street-Apt #2			12 20 2006
	City	State	Zip Code	Transaction ID: SA11Ai-CN5307
	Bedford	PA	15522	Amount of Each Receipt this Period
		. , ,	TOOLE	Amount of Each recorpt this remod
	FEC ID number of contributing federal political committee.	C		300.00
	rederai politicai committee.			
		Occupation	า	
	none	Retired w	vidow	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-		1
	Other (specify) ▼		300.00	
				1
	Full Name (Last, First, Middle Initial)			
В.	R Jeffrey Kimball			Date of Receipt
	Mailing Address 132 West Highland Avenu	е		M M / D D / Y Y Y Y
				12 18 2006
	City	State	Zip Code	Transaction ID: SA11Ai-CN5300
	Ebensburg	PA	15931	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		500.00
	I Robert Kimball and Acco.	Occupation		
	<u>C.</u>	Presiden	t/CFO	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
		Election C	sycle-to-Date ▼	Spending (2 0.3.0. 441a(1)/441a-1)
	X Primary General		500.00	1
	Other (specify) ▼	0 0	300.00	
_	Full Name (Last, First, Middle Initial)			Data of Bassist
U.	Todd N Roadman			Date of Receipt
	Mailing Address 121 Diehl Field Road			12 29 2006
	City	State	Zip Code	Transaction ID: SA11Ai-CN5342
	Bedford	PA	15522	
		ГА	15522	Amount of Each Receipt this Period
	FEC ID number of contributing	C		250.00
	federal political committee.			
	Name of Employer Reed Wertz and Roadman	Occupation	า	┪
	Reed Wertz and Roadman		e & Financial Planning	Limit Increased Due to Opponent's
			ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		, , , , , , , , , , , , , , , , , , , ,	1
	Other (specify)		250.00	
			0 0 0 0 0 0 0	1
,	UBTOTAL of Receipts This Page (optional)			1050.00
\vdash	TOTAL OF HECEIPES THIS Page (optional)			
-	OTAL This Period (last page this line number only	١		4525.00
	VIAL THIS FERIOU HASE DAUGHINS HITE HUMBER ONLY	1		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/27 (check only one)
An	y information copied from such Reports and St	atements may	y not be sold or used by any perso	12 13a 13b 14 15 on for the purpose of soliciting contributions
$\frac{or}{or}$	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bill Shuster for Congress	name and add	oress of any political committee to	solicit contributions from such committee.
۹.	Full Name (Last, First, Middle Initial) Dominion Mailing Address One James River Plaza PO Box 26666	ı		Date of Receipt 1 2 1 8 2 0 0 6
	City Richmond	State VA	Zip Code 23261	Transaction ID: SA11C-CN5303 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0	0108209	1000.00
	Name of Employer none Receipt For: 2008 X Primary General Other (specify) ▼	Occupation none Election C	Dycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Edison International Mailing Address 2244 Walnut Grove Ave	enue		Date of Receipt 1 2 1 8 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11C-CN5302
	Rosemead FEC ID number of contributing federal political committee.	C CO	91770 0019653	Amount of Each Receipt this Period 1000.00
	Name of Employer none Receipt For: 2008 X Primary General Other (specify)	Occupation none Election C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
).	Full Name (Last, First, Middle Initial) Grand Trunk Rail-Illinois Central			Date of Receipt
	Mailing Address 601 Pennsylvania Aven Suite 500 North Buildin	g	7: 0	1 2 1 8 2 0 0 6
	City Washington	State DC	Zip Code 20004	Transaction ID: SA11C-CN5299 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0	0095117	250.00
	Name of Employer None	Occupatio None	n	Designated to General 2006 Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 250.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			2250.00
T	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 10/27 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) A. Penske Truck Leasing Co LP Date of Receipt Mailing Address Route 10 Green Hills 12 18 2006 PO Box 563 City Zip Code State Transaction ID: SA11C-CN5301 Reading PA 19603 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C C00373217 federal political committee. Name of Employer none Occupation Limit Increased Due to Opponent's none Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	>	1000.00
TOTAL This Period (last page this line number only)	•	3250.00

SCHEDULE B (FECFORIII 3)	Use seperate schedule(s)	(check only	NUMBER: PAGE 11 / 27	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		17 18 19a 19b 20a 20b 20c X 21	
Any Information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) Bill Shuster for Congress				
Full Name (Last, First, Middle Initial) William Shuster Mailing Address 9 Overlook Drive			Transaction ID: SB21-EX4602 Date of Disbursement M M M / D B / Y Y Y O O 6	
City Hollidaysburg	State Zip Code PA 16648		Amount of Each Disbursement this Period	
Purpose of Disbursement Promotional Tickets Candidate Name		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	sement For: 2008 X Primary General Other (specify)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Donations	
Full Name (Last, First, Middle Initial) B. Morrison Cove Republican Club			Transaction ID: SB21-EX4596 Date of Disbursement	
Mailing Address RD 1 Box 426 Meadowside Acres	Meadowside Acres			
City Martinsburg	State Zip Code PA 16662		Amount of Each Disbursement this Period	
Purpose of Disbursement Promotional Tickets Candidate Name		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Disbur	sement For: 2006 Primary X General Other (specify) ▼		Donations	
Full Name (Last, First, Middle Initial) C. The Salvation Army			Transaction ID: SB21-EX4603 Date of Disbursement	
Mailing Address 1813 Sixth Avenue			12 M / D 0 8 / Y 2 0 0 6 Y	
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period	
Purpose of Disbursement Donations		012	Refund or Disposal of Excess	
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Disburg Senate President State: District:	sement For: 2006 Primary X General Other (specify)		Donations	
SUBTOTAL of Disbursements This Page (optional	I)		120.00	
TOTAL This Period (last page this line number onl			120.00	

CCHEDIII E B /EEC Form 2 \						
SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	E NUMBER: PAGE 12 / 27			
TEMIZED DISBURSEMENTS	for each category of the	l ` <u>-</u>	-			
	Detailed Summary Page	<u> </u> -	X 17 18 19a 19b 20a 20b 20c 21			
Annulation and Chaten						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
Bill Shuster for Congress						
Full Name (Last, First, Middle Initial) 4. Ciocca Benton & Company P.C.			Transaction ID: SB17-EX4611 Date of Disbursement			
Mailing Address 912 Pleasant Valley Blvc			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix} $			
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement			5125.71			
Professional Services		001	Refund or Disposal of Excess			
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
Senate X President	ment For: 2008 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses			
State: District:						
Full Name (Last, First, Middle Initial) Giocca Benton & Company P.C.			Transaction ID: SB17-EX4614 Date of Disbursement			
Mailing Address 912 Pleasant Valley Blvc			12 D 2 6 Y 2 0 0 6 Y			
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement Professional Services		001	1440.43			
Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
Senate X President	ment For: 2008 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses			
State: District:						
Full Name (Last, First, Middle Initial) Altoona Mirror			Transaction ID: SB17-EX4605 Date of Disbursement			
Mailing Address PO Box 2008			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} $			
City Altoona	State Zip Code PA 16602		Amount of Each Disbursement this Period			
Purpose of Disbursement		215.00				
Print Ads Candidate Name		004 Category/	Refund or Disposal of Excess Contributions Required Under			
Office Sought: House Disburse	ment For: 2006	Туре	11 C.F.R. 400.53			
Office Sought: House Disburse Senate President	Primary X General Other (specify)		Advertising Expenses			
State: District:	(opoon)/ V					
SUBTOTAL of Disbursements This Page (optional)		>	6781.14			

TOTAL This Period (last page this line number only)

	and address of any political tate Zip Code MD 21265	d by any person	X 17 18 19a 19b 20a 20b 20c 21 for the purpose of solicating contributions
r for commercial purposes, other than using the name of NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 646 City Si Baltimore M Purpose of Disbursement Telephone Candidate Name	and address of any political data and address of addre	001 Category/	Transaction ID: SB17-EX4612 Date of Disbursement M M / D D D Y Y Y Y O Y O Y Amount of Each Disbursement this Period 275.67 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Bill Shuster for Congress Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 646 City Structure Mailing Purpose of Disbursement Telephone Candidate Name	nent For: 2008 Primary General	Category/	Date of Disbursement M
Mailing Address PO Box 646 City St Baltimore Nurpose of Disbursement Telephone Candidate Name	nent For: 2008 Primary General	Category/	Date of Disbursement M
City Si Baltimore M Purpose of Disbursement Telephone Candidate Name	nent For: 2008 Primary General	Category/	Amount of Each Disbursement this Period 275.67 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Baltimore M Purpose of Disbursement Telephone Candidate Name	nent For: 2008 Primary General	Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Telephone Candidate Name	Primary General	Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbursem	Primary General		Administrative/Salary/Ove-
			rhead Expenses
Full Name (Last, First, Middle Initial) State Farm Insurance			Transaction ID: SB17-EX4606 Date of Disbursement 12 0 0 8 2 0 0 6
Mailing Address 715 Lexington Avenue			12 08 2006
•	tate Zip Code A 16601		Amount of Each Disbursement this Period
Purpose of Disbursement Vehicle Expenses Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	nent For: 2006 Primary X General Other (specify) ▼		Administrative/Salary/Ove- rhead Expenses
Full Name (Last, First, Middle Initial) - Shari Frankhauser			Transaction ID: SB17-EX4600 Date of Disbursement
Mailing Address 2324 Fourth Street			12 05 7 2006
	zate Zip Code A 16601		Amount of Each Disbursement this Period
Purpose of Disbursement Taxi/Car/Bus Expense Candidate Name		002 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	nent For: 2006 Primary X General Other (specify) ▼	Туре	Travel Expenses
SUBTOTAL of Disbursements This Page (optional)			951.37

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S	CHEDULE B (FEC Form 3)	Use sepe	erate schedule(s)	-	NUMBER: PAGE 14 / 27
IT	EMIZED DISBURSEMENTS		category of the	(check only	y one)
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Ν	NAME OF COMMITTEE (In Full)				
17	Bill Shuster for Congress				
\mathbb{L}					
A.	Full Name (Last, First, Middle Initial) UPS				Transaction ID: SB17-EX4607 Date of Disbursement
	Mailing Address PO Box 7247-0244				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Philadelphia	PA	19170		
	Purpose of Disbursement		Г		32.29
	Postage			001	Refund or Disposal of Excess Contributions Required Under
	Candidate Name			Category/ Type	11 C.F.R. 400.53
	Office Sought: House Disb	ursement For:	2006	туре	
	Senate Sought.	Primary	X General		Administrative/Salary/Ove-
	President	Other (spe			rhead Expenses
	State: District:		· · · · · · · · · · · · · · · · · · ·		
	Full Name (Last, First, Middle Initial)				Transaction ID: SB17-EX4613
В.	UPS				Date of Disbursement
	Mailing Address PO Box 7247-0244				12 14 2006
	PO BOX 7247-0244				
	City	State PA	Zip Code 19170		Amount of Each Disbursement this Period
	Philadelphia	PA	19170		17.28
	Purpose of Disbursement Postage			001	Refund or Disposal of Excess
	Candidate Name		L	Category/	Contributions Required Under
				Туре	11 C.F.R. 400.53
	Office Sought: House Disb	ursement For:	2008		Admin <u>is</u> trative/Salary/Ove-
	Senate	X Primary	General		rhead Expenses
	President	Other (spe	ecity) 🔻		
	State: District:				
C.	Full Name (Last, First, Middle Initial) Benjamin Hotel				Transaction ID: SB17-EX4624 Date of Disbursement
	Mailing Address 125 East 50th Street				12 M / 26 / Y 2006 Y
	City	State	Zip Code		Amount of Each Disbursement this Period
	New York	NY	10022		1161.22
	Purpose of Disbursement Lodging		1	002	Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disb	ursement For:	2008		Travel Expenses
	Senate	X Primary	General		Havel Expenses
	President	Other (spe	ecify) 🔻		
_	State: District:				
。	UBTOTAL of Disbursements This Page (option	nal)			1210.79
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S	CHEDULE B (FEC Form 3	3)		FORLINE	NUMBER:	PAGE 1	5 / 27	
	EMIZED DISBURSEMEN	Use sep	Use seperate schedule(s) for each category of the		ly one)			
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	y Information copied from such Reports for commercial purposes, other than usin							
\setminus	NAME OF COMMITTEE (In Full)							
\rangle	Bill Shuster for Congress							
Α.	Full Name (Last, First, Middle Initial) ATLANTIC broadband				Transaction ID: 0		1	
	Mailing Address Box 371801				12 0	8 20	0 6 °	
	City Pittsburgh	State PA	Zip Code 15250		Amount of Each I	Disbursement th	nis Period	
	Purpose of Disbursement Utilities			001		sposal of Excess		
	Candidate Name			Category/ Type	Contributions 11 C.F.R. 400	Required Under 0.53	r	
	Office Sought: House Senate President	Disbursement For: Primary Other (sp	2006 X General ecify) ▼		Administrative/s rhead Expenses	Salary/Ove- s		
	State: District:							
В.	Full Name (Last, First, Middle Initial) ATLANTIC broadband				Transaction ID: S Date of Disburser)	
	Mailing Address Box 371801				1 ^M 2 M / 2	6 Y 20	0 6 °	
	City Pittsburgh	State PA	Zip Code 15250		Amount of Each I	Disbursement th	nis Period	
	Purpose of Disbursement Utilities			001	Refund or Dis	posal of Excess	54.02	
	Candidate Name			Category/ Type	Contributions 11 C.F.R. 400	Required Under 0.53	r	
	Office Sought: House Senate President	Disbursement For: X Primary Other (sp	2008 General ecify)		Administrative/s rhead Expenses	Salary/Ove-		
	State: District:							
C.	Full Name (Last, First, Middle Initial) CenPenn Realty LLC				Transaction ID: S Date of Disburser	-	7	
	Mailing Address 513 Allegheny S	Street			12 2	6 Y 20	0 6 °	
	City Hollidaysburg	State PA	Zip Code 16648		Amount of Each I	Disbursement th	nis Period	
	Purpose of Disbursement					50	00.00	
	Rent Candidate Name		001 Category/ Type	Refund or Dis Contributions 11 C.F.R. 400	sposal of Excess Required Under 0.53	s r		
	Office Sought: House Senate President	Disbursement For: X Primary Other (sp	2008 General		Administrative/s rhead Expenses	Salary/Ove- s		
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s	UBTOTAL of Disbursements This Page	(optional)		<u> </u>		65	7.97	

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SCHEDULE B (FEC Form 3)		Use sepe	ICA CANATSTA CONACIIIA(C)		-	OR LINE NUMBER: PAGE 16 / 27 heck only one)					6 / 27		
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	y Information copied from such Repo for commercial purposes, other than												
\setminus	NAME OF COMMITTEE (In Full)												
/	Bill Shuster for Congress												
Α.	Full Name (Last, First, Middle Initial) Robbe Bendick						Date	of Di	sburs	emer	17-EX		
	Mailing Address 1636 West A	bingdon Dri	ve #101				^M 2) 5 ^D	Ĺ	ž o	0.6
	City Alexandria		State VA	Zip Code 22314			Amou	int of	Each	Disk	oursem	ent th	nis Period
	Purpose of Disbursement		VA	22314	_							25	50.75
	Vehicle Expenses					001	Re	efund	d or D	ispos	al of E	xcess	, , , , , , , , , , , , , , , , , , ,
	Candidate Name					ategory/ Type	L Co	ontrik		s Re	quired		
	Office Sought: House Senate President	Disburse	ement For: Primary Other (spe	2006 X General ecify) ▼	I	.,	Admii rhead	nistr Exp	ative cense	/Sal es	ary/O	ve-	
	State: District:			•									
В.	Full Name (Last, First, Middle Initial) S&T Bank						Trans Date		sburs	emer	17-EX	(4630)
	Mailing Address 208 West Pla	ank Road					^M 2	M	D C	1	/ Y	ž 0	0 6 °
	City Altoona		State PA	Zip Code 16602			Amou	int of	Each	Disk	oursem	ent th	nis Period
	Purpose of Disbursement Bank Service Charge					001	B ₁	efund	d or D	isnos	al of E	-	25.00
	Candidate Name					ategory/ Type	L Co	ontrik		s Re	quired		
	Office Sought: House Senate President		ement For: Primary Other (spe	2008 General ecify) ▼			Bank	Ser	vice (Cha	ge		
	State: District:												
C.	Full Name (Last, First, Middle Initial) Cingular Wireless						Trans Date o			_	17-EX nt	4621	I
	Mailing Address PO Box 6416	3					^M 2	М	D 2	26	/ Y	ž o	0 6
	City Carol Stream		State IL	Zip Code 60197			Amou	ınt of	Each	Dist	oursem	ent th	nis Period
	Purpose of Disbursement					• •						2	17.40
	Telephone Candidate Name					001 ategory/ Type	L Co	ontrib		s Re	sal of E quired		
	Office Sought: House Senate President		ement For: Primary Other (spe	2008 General	I	71: -	Admii rhead	nistr Exp	ative cense	/Sal	ary/O	ve-	
	State: District:			· - J/ ▼									
s	UBTOTAL of Disbursements This P	age (optional)				▶					•	49	3.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)	I I I I I I I I I I I I I I I I I I I	FOR LINE NUMBER: PAGE 17 / 27
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	check only one)
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Bill Shuster for Congress		
Full Name (Last, First, Middle Initial) Jeffrey Loveng		Transaction ID: SB17-EX4592 Date of Disbursement
Mailing Address 228 W. Windsor Avenue		11 30 2006
	State Zip Code VA 22301	Amount of Each Disbursement this Period
Purpose of Disbursement Meals Candidate Name	Cat	02 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
· -	ment For: 2008 Primary General Other (specify)	Travel Expenses
Full Name (Last, First, Middle Initial) e2c consulting Inc.		Transaction ID: SB17-EX4618 Date of Disbursement
Mailing Address PO Box 29576		1 2 M / D 2 6 / Y Y Y O O 6 Y
,	State Zip Code DC 20017	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Consultant Candidate Name		03 Refund or Disposal of Excess Contributions Required Under
Office Sought: House Disburse		11 C.F.R. 400.53
	Primary General Other (specify)	Solitication and Fundrais- ing Expenses
Full Name (Last, First, Middle Initial) e2c consulting Inc.		Transaction ID: SB17-EX4619 Date of Disbursement
Mailing Address PO Box 29576		12 M / 26 / Y 2006
	State Zip Code DC 20017	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising	- V	03 Refund or Disposal of Excess
Candidate Name	Cat	egory/ ype Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
· —	ment For: 2008 Primary General Other (specify)	Solitication and Fundrais- ing Expenses
SUBTOTAL of Disbursements This Page (optional) .		4508.49
TOTAL This Period (last page this line number only)		

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SCHEDULE B (FEC Form 3)			Use seperate schedule(s))	-	E NUMBER: PAGE 18 / 27		
ITEMIZED DISBURSEMENTS		rs	for each category of the			(check onl	<u>^</u>		
				Detailed :	Summary Page		-	X 17 18 19a 19b 20a 20b 20c 21	
	ny Information copied from such Reports and Statements may not be sold or used by any pers r for commercial purposes, other than using the name and address of any political committee to							for the purpose of solicating contributions	
\setminus	NAME OF COM	MITTEE (In Full)							
$ \rangle$	Bill Shuster for	Congress							
_		First, Middle Initial)						Transaction ID: SB17-EX4599	
A.	MCI Conference	ping						Date of Disbursement	
	Mailing Address	500 Second Ave	enue SE					1 1 2 M / 0 5 / Y 2 0 0 6 Y	
	City Cedar Rapids			tate A	Zip Code 52401			Amount of Each Disbursement this Period	
	Purpose of Disbu	rsement	•		32401			165.47	
	Telephone					L	001	Refund or Disposal of Excess	
	Candidate Name						ategory/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought:	House Senate	Disbursen	nent For: Primary	2006 X General			Administrative/Salary/Ove-	
		President		Other (spe				rhead Expenses	
	State:	District:							
В.	,	First, Middle Initial)						Transaction ID: SB17-EX4609	
٥.	SCM Associate	es inc.						Date of Disbursement	
	Mailing Address	Post Office Box 10 Main Street	720					12 M / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City			tate NH	Zip Code 03452			Amount of Each Disbursement this Period	
	Jaffrey Purpose of Disbu	reement		NI I	03432			2811.40	
	Fundraising	ii Serrierit					003	Refund or Disposal of Excess	
	Candidate Name						ategory/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought:	House Senate	Disbursen	nent For: Primary	2008 General			Solitication and Fundrais-	
		President		Other (spe				ing Expenses	
	State:	District:			•				
_	•	First, Middle Initial)						Transaction ID: SB17-EX4610	
C.	SCM Associate	es Inc.						Date of Disbursement	
	Mailing Address	Post Office Box 10 Main Street	720					12 M / D 1 A / Y Y Y O Y 6 Y	
	City Jaffrey			tate NH	Zip Code 03452			Amount of Each Disbursement this Period	
	Purpose of Disbu	ırsement					000	500.00	
	Candidate Name						003 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought:	House	Disbursen		2008			Solitication and Fundrais-	
		Senate		Primary	General			ing Expenses	
	State:	President District:		Other (spe	ecify)				
Г	Jiuio.	Diotriot.							
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18079.78

TOTAL This Period (last page this line number only)

SCHEDULE D (FEC Form 3) D

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DEBTS AND OBLIGATIONS	schedule(s) for each	(check only one)	Г	9
Excluding Loans	numbered line)		Х	10
NAME OF COMMITTEE (In Full)				
Bill Shuster for Congress				

Bill Shuster for Congress		
A. Full Name (Last, First, Middle Initial) of Debto Don Pablos	r or Creditor	Nature of Debt (Purpose): Invoice: Travel Expenses
Mailing Address Plank Road		-
City State Altoona PA	ZIP Code 16602	-
Outstanding Balance Beginning This Period		Transaction ID: SD10-INV1730
Amount Incurred This Period	Payment This Period .00	Outstanding Balance at Close of This Period .00
B. Full Name (Last, First, Middle Initial) of Debto Covington & Burling	r or Creditor	Nature of Debt (Purpose): Invoice: Invoice 60339388 Administrative
Mailing Address 1201 Pennsylvania Avenue	e NW	
City State Washington DC	ZIP Code 20004	
Outstanding Balance Beginning This Period		Transaction ID: SD10-INV3289
7500.00 Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
.00	.00	7500.00
C. Full Name (Last, First, Middle Initial) of Debto S&T Bank	r or Creditor	Nature of Debt (Purpose): Invoice: Campaign Materials
Mailing Address 208 West Plank Road		
City State Altoona PA	ZIP Code 16602	
Outstanding Balance Beginning This Period .00		Transaction ID: SD10-INV4473
Amount Incurred This Period 25.00	Payment This Period .00	Outstanding Balance at Close of This Period 25.00
SUBTOTALS This Period This Page (optional)		▶ 7525.00
2) TOTALS This Period (last page this line number	only)	>
3) TOTALS OUTSTANDING LOANS from Schedu	ule C (last page only)	>

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)

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3C1	JEDULE D (FEC FOIIII 3)		(Use separate	
DEBTS AND OBLIGATIONS			schedule(s) for each numbered line	FOR LINE NUMBER: (check only one) 9 X 10
NAI	ME OF COMMITTEE (In Full) Shuster for Congress			1 1/1/10
- 1	A. Full Name (Last, First, Middle Initial) of Debtor Quill Corporation	or Creditor		of Debt (Purpose): :: Signature stamp strative/
L	Mailing Address PO Box 94081			
- 1	City State Palatine IL	ZIP Code 60094		
	Outstanding Balance Beginning This Period .00		٦	Transaction ID: SD10-INV4494
	Amount Incurred This Period 40.52	Payment This Period		nding Balance at Close of This Period 40.52
	B. Full Name (Last, First, Middle Initial) of Debtor CCH Incorporated	or Creditor		of Debt (Purpose): :: Campaign Finance Administ
	Mailing Address PO Box 5490	710.0		
- 1	City State Chicago IL	ZIP Code 60680		
	Outstanding Balance Beginning This Period .00		٦	Transaction ID: SD10-INV4474
	1 1 1 1 1 1 1 1 1 1	Payment This Period		Transaction ID: SD10-INV4474 Inding Balance at Close of This Period
	.00	Payment This Period .00	Outsta	
	.00 Amount Incurred This Period	.00	Outsta	nding Balance at Close of This Period
	.00 Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg	or Creditor	Outsta	nding Balance at Close of This Period 826.80 of Debt (Purpose):
	.00 Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol	.00	Outsta	nding Balance at Close of This Period 826.80 of Debt (Purpose):
	.00 Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg City State	or Creditor ZIP Code	Outsta Nature of Invoice	nding Balance at Close of This Period 826.80 of Debt (Purpose):
	Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg City State Washington DC	or Creditor ZIP Code	Outsta Nature of Invoice	nding Balance at Close of This Period 826.80 of Debt (Purpose): Travel Expenses
	Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg City State Washington DC Outstanding Balance Beginning This Period .00 Amount Incurred This Period	ZIP Code 20515 Payment This Period	Outsta Nature of Invoice Outsta	nding Balance at Close of This Period 826.80 of Debt (Purpose): Travel Expenses Transaction ID: SD10-INV4475 Inding Balance at Close of This Period
	Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg City State Washington DC Outstanding Balance Beginning This Period .00	.00 or Creditor ZIP Code 20515	Outsta Nature of Invoice Outsta	nding Balance at Close of This Period 826.80 of Debt (Purpose): Travel Expenses
	Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg City State Washington DC Outstanding Balance Beginning This Period .00 Amount Incurred This Period	ZIP Code 20515 Payment This Period .00	Outsta Nature of Invoice Outsta	nding Balance at Close of This Period 826.80 of Debt (Purpose): Travel Expenses Transaction ID: SD10-INV4475 Inding Balance at Close of This Period
1)	Amount Incurred This Period 826.80 C. Full Name (Last, First, Middle Initial) of Debtor US Members Dining Room Mailing Address H-117 The Capitol HOB Rayburn Bldg City State Washington DC Outstanding Balance Beginning This Period .00 Amount Incurred This Period	ZIP Code 20515 Payment This Period .00	Outsta Nature of Invoice Outsta	nding Balance at Close of This Period 826.80 of Debt (Purpose): Travel Expenses Transaction ID: SD10-INV4475 Inding Balance at Close of This Period 18.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 21 / 27 SCHEDULE D (FEC Form 3) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Bill Shuster for Congress A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Invoice: Notary license for J. Mearkle A Pennsylvania Association Of Notaries Mailing Address 14 Wood Street ZIP Code City State PA Pittsburgh 15222 Outstanding Balance Beginning This Period Transaction ID: SD10-INV4478 .00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 201.31 .00 201.31 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Invoice: Administrative/-Salary/Overhead **US Postal Service** Mailing Address 525 Allegheny Street ZIP Code City State Hollidaysburg PA 16648 Outstanding Balance Beginning This Period Transaction ID: SD10-INV4479 .00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period .00 4.73 4.73 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): The Dubliner An Irish Pub Invoice: Travel Expenses Mailing Address Number 4 F Street ZIP Code City State Washington DC 20001 Transaction ID: SD10-INV4480 Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 40.00 .00 40.00 246.04 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

(Use separate schedule(s) for each

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Excluding Loans	numbered line)	X 10	
NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
A. Full Name (Last, First, Middle Initial) of Debtor Dennys Restaurant	or Creditor		ebt (Purpose): Fravel Expenses
Mailing Address I-70 and Route 30			
City State Breezewood PA	ZIP Code 15533		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10-INV4481
.00 Amount Incurred This Period	Payment This Period	Outstandi	as Delance at Class of This Devied
22.71	.00	Outstandin	ng Balance at Close of This Period 22.71
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):
Bryant Park Cafe	or Oroditor		Fravel Expenses
Mailing Address 476 Fifth Avenue			
City State New York NY	ZIP Code 10018		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10-INV4482
.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
154.51	.00		154.51
C. Full Name (Last, First, Middle Initial) of Debtor Peacock Alley	or Creditor		ebt (Purpose): Fravel Expenses
Mailing Address 301 Park Avenue			
City State New York NY	ZIP Code 10022		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10-INV4483
.00			
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of This Period
61.36	.00		61.36
1) SUBTOTALS This Period This Page (optional)		>	238.58
2) TOTALS This Period (last page this line number o	nly)	>	
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	>	
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Excluding Loans	numbered line)	
NAME OF COMMITTEE (In Full)		
Bill Shuster for Congress		

cluding Loans		numbered line)	X 10
AME OF COMMITTEE (In Full)		1	1 1 1 1 1 1
I Shuster for Congress			
A. Full Name (Last, First, Middle Initial) of Debtor Filomena Ristorante	or Creditor	Nature of Debt (Purpose) Invoice: Travel Expe	
Mailing Address 1063 Wisconsin Avenue N	W		
City State Washington DC	ZIP Code 20007		
Outstanding Balance Beginning This Period		Transaction ID:	SD10-INV4484
.00 Amount Incurred This Period	Payment This Period	Outstanding Balance at	Close of This Period
4902.12	.00		4902.12
3. Full Name (Last, First, Middle Initial) of Debtor Amtrak	or Creditor	Nature of Debt (Purpose) Invoice: Travel Expe	
Mailing Address Market Street			
City State Philadelphia PA	ZIP Code 19019		
Outstanding Balance Beginning This Period		Transaction ID:	SD10-INV4485
.00 Amount Incurred This Period	Payment This Period	Outstanding Balance at	Close of This Period
472.00	.00		472.00
C. Full Name (Last, First, Middle Initial) of Debtor Nemacolin Woodlands Resort & Spa	or Creditor	Nature of Debt (Purpose) Invoice: Solitication a Fundraising E	: and
Mailing Address 1001 LaFayette Drive			
City State Farmington PA	ZIP Code 15437		
Outstanding Balance Beginning This Period .00		Transaction ID:	SD10-INV4486
Amount Incurred This Period	Payment This Period	Outstanding Balance at	Close of This Period
7413.82	.00		7413.82
SUBTOTALS This Period This Page (optional)		•	12787.94
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TOTALS OUTSTANDING LOANS from Schedu	lle C (last page only)	>	
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PAGE 24 / 27 FOR LINE (check only

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ly one)		9
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Excluding Loans		numbered line) X 10
NAME OF COMMITTEE (In Full) Bill Shuster for Congress		
A. Full Name (Last, First, Middle Initial) of Debtor of Dos Caminos	r Creditor	Nature of Debt (Purpose): Invoice: Travel Expenses
Mailing Address 373 Park Avenue S		
City State New York NY	ZIP Code 10016	
Outstanding Balance Beginning This Period .00		Transaction ID: SD10-INV4487
Amount Incurred This Period 336.11	Payment This Period .00	Outstanding Balance at Close of This Period 336.11
B. Full Name (Last, First, Middle Initial) of Debtor of Fifth Avenue Coffee Bar	r Creditor	Nature of Debt (Purpose): Invoice: Travel Expenses
Mailing Address 389 Fifth Avenue		
City State New York NY	ZIP Code 10016	
Outstanding Balance Beginning This Period		Transaction ID: SD10-INV4488
.00 Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
33.95	.00	33.95
C. Full Name (Last, First, Middle Initial) of Debtor of Benjamin Hotel	r Creditor	Nature of Debt (Purpose): Invoice: Travel Expenses
Mailing Address 125 East 50th Street		
City State New York NY	ZIP Code 10022	
Outstanding Balance Beginning This Period .00		Transaction ID: SD10-INV4489
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1140.22	.00	1140.22
1) SUBTOTALS This Period This Page (optional)		▶ 1510.28
2) TOTALS This Period (last page this line number or	ly)	>
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>
4) ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page only)	>

(Use separate schedule(s) for each

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FOR LINE NUMBER:
(check only one)

Excluding Loans		numbered line)	(Crieck offly offe) X 10							
NAME OF COMMITTEE (In Full)										
Bill Shuster for Congress										
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Benjamin Hotel			Nature of Debt (Purpose): Invoice: Travel Expenses							
Mailing Address 125 East 50th Street										
City State New York NY	ZIP Code 10022									
Outstanding Balance Beginning This Period			Transaction ID: SD10-INV4490							
.00										
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period							
1140.22	.00		1140.22							
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon		Nature of D Invoice: 8 26Y Adm	Debt (Purpose): 114 696-0225 608 inistra							
Mailing Address PO Box 646										
City State Baltimore MD	ZIP Code 21265									
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10-INV4493							
.00										
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period							
147.49	.00		147.49							
1) SUBTOTALS This Period This Page (optional)		•	1287.71							
2) TOTALS This Period (last page this line number or	nly)	>	24480.87							
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	. •								
4) ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page only)	→								

Image# 27950044727 PAGE 26 / 27 SCHEDULE D (FEC Form 3) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each numbered line) X 9 (check only one) **Excluding Loans** 10 NAME OF COMMITTEE (In Full) Bill Shuster for Congress A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Invoice: New Campaign Computer Administr Circuit City Stores Inc Mailing Address 141 Sierra Drive ZIP Code City State Altoona PA 16601 Outstanding Balance Beginning This Period Transaction ID: SD9-INV4429 -170.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period -120.00 50.00 .00

1) SUBTOTALS This Period This Page (optional)	•		ľ	 		5	50.00	0	
2) TOTALS This Period (last page this line number only)	>			50.00					
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	•			 	<u> </u>			-	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	•	L		 	 	<u>.</u>		_	

Image# 27950044728

Form/Schedule: **F3N**Transaction ID:

The accompanying Report of Receipts and Disbursements from November 28 2006 through December 31 2006 for the Bill Shuster for Congress Committee included in the prescribed form have been prepared by Fredierck A. Ciocca CPA. I have prepared such financial statements in my capacity as treasurer of the Bill Shuster for Congress Committee.